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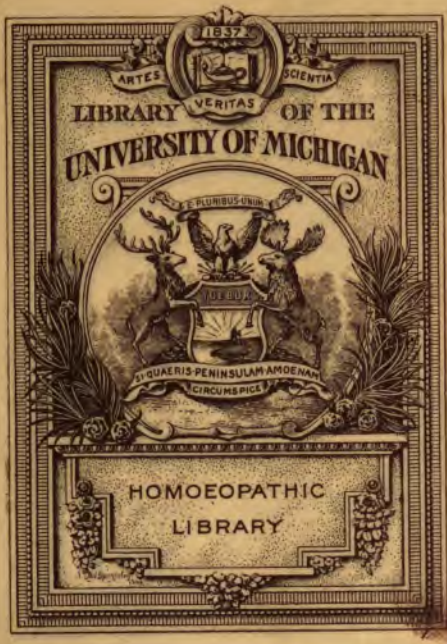
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KNAVES OR FOOLS?

Daran erkenn' ich den gelehrten Herrn!
Was Ihr nicht tastet, steht Euch Meilen fern;
Was Ihr nicht fasst, das fehlt Euch ganz und gar;
Was Ihr nicht rechnet, glaubt Ihr, sei nicht wahr;
Was Ihr nicht wägt, hat für Euch kein Gewicht;
Was Ihr nicht münzt, das, meint Ihr, gelte nicht.

GOETHE

KNAVES OR FOOLS?

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PREFACE

IN defending any cause it is difficult to steer between the position of the special pleader and that of the apologist. I should much resent seeming to make any apology for Homœopathy, since, if apologies are due at all in this matter, it is not Homœopathy that owes them. But I have endeavoured to avoid intemperate or unfair advocacy, believing that they serve no cause well, and least of all a scientific one. Preface

Moreover, I have little faith in the power of abstract conceptions of Truth and Justice over the minds of men. We form our beliefs, I fancy, from hearsay as much as from independent enquiry, out of intellectual apathy and a habit of deference to bold assertion. " The intolerable fatigue of thought " is a very real burden, one we shirk as much as we dare, and therefore, in appealing for independent judgement, I am contending against that disinclination for mental exertion which I feel too

 strongly myself to underrate in others. I submit, however, that members of a profession of public service are pledged to a certain degree of effort; and as our pretensions are considerable, we must in some sort justify them by our labours. He who has ever known the joy of clear thinking will feel that the result (even if incomplete) repays the endeavour. So then in putting forward a plea for reconsideration of popular conclusions, I am not without hope that I may here and there obtain a hearer who will proceed to seek a justification for beliefs he may hitherto have entertained as a legacy from respected teachers, or as a dogma so widely accepted as to seem divinely inspired. Homœopathists ask for nothing but investigation. Their own conclusions are founded on enquiry conducted to the best of their ability; and while they fully admit the possibility that they may be mistaken, they would prefer to be confounded by the proofs of experiment, rather than overwhelmed by the weight of incurious authority.

I am much indebted to many medical men for aid derived from their writings and their personal encouragement. I wish to make grateful acknowledgement of assis-

tance to Dr Dyce Brown, Dr Byres Moir, Dr Burford, Dr J. H. Clarke, Dr E. A. Neatby and Dr Speirs Alexander. The principal books from which I have drawn material are: Dr Bradford's *Life of Hahnemann*, Dr Ameke's *History of Homœopathy* and Dr Dudgeon's *Lectures*. Allusion is made in the text to works on *Materia Medica*, by Professor Lewin and Professor Schulz. The work of the last-named indeed, is of the greatest importance to all who are interested in the art of medicine.

October 24, 1907 C. E. WHEELER

KNAVES OR FOOLS?

I
THE SITUATION

FOR many years of the history of mankind those who undertook the responsibility of dealing with its bodily diseases, framed theory after theory as a basis for diagnosis and treatment, and as one conception after another proved inadequate, new views were put forward by imaginative physicians, from Galen to Paracelsus and Paracelsus to Brown. Into the welter of conflicting theories of the rational treatment of disease, Samuel Hahnemann, a century or so ago, dropped yet another formula, supported by years of personal investigation and much experience of the past, simple in method however difficult in application, and destined to flutter the dovecots of established medicine more than any one system before or since. From the beginning the enun-

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The Situation ciated principle, *Similia similibus curentur*, met with violent opposition. It won enthusiastic adherents and steadily maintained its ground, but all that it has ever won has been in spite of persistent denial of its truth, while contumely and ostracism have been the reward of its followers. The hundred years of its existence have seen the growth of exact knowledge in physiology and pathology to an extent undreamed of in the centuries preceding its birth, and together with increased knowledge has come a wholesome distrust of the general conceptions of disease that once seemed all important. Thus Homœopathy, which was at first condemned in the name of the generalizations it attacked, is now passed over without investigation, because *all* systems are regarded with suspicion, and the failure of those it helped to destroy is made a reason for ignoring it. To-day, though the great majority of physicians will condemn it and brand its adherents as knaves or fools, few could give any detailed account of its aims, its methods, its history or its literature. From first to last, Homœopathy has been the doctrine of a minority, and has had to face misrepresentation as well as ignorance. Neverthe-

less, to-day it has adherents almost all over the world and hospitals devoted to its practice, and the medical profession at present, which has never been so well organized or so international, is face to face with the situation that in its very midst a small minority persists, maintaining a principle which the majority ignore or deny. Although in England and the Continent the principle is dependent for new practitioners on converts from the orthodox ranks, it yet obtains converts enough to perpetuate its heresy. The teaching institutions, the State examinations, the big centres of hospital experience, are all in the hands of those to whom the name of Homœopathy is accursed, yet Homœopathy survives and even extends. Error does not become truth merely by being so regarded for a length of time, and the fact that the fundamental doctrine of Hahnemann has survived unchanged through a century of discovery and increasing knowledge, is no guarantee that it is not based on a fallacy; but when it is remembered that the doctrine has had to face uncompromising hostility and make its converts by practical demonstration of its claims, the fact that it has held its

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ground may well be regarded by its friends as a good augury. The situation, therefore, is this: medicine to-day has accumulated observations and made innumerable experiments, but loses faith more and more in the possibilities of drug treatment. The leading textbooks are filled with information as to diagnosis and pathology, but dismiss treatment with brevity almost amounting to despair. To rely on nursing and to let disease take its course is the rule for acute disease; for chronic disease, there is treatment by diet and climate, rest and exercise, but throughout, a general scepticism that the physician can hope to give much aid in any direct manner, save for isolated instances wherein are recorded the few triumphs of empiricism. Surgery has celebrated triumph after triumph for the last quarter of a century and may well rejoice in her record, but there remain many ills that surgery cannot cure; and there are a few signs noticeable hinting that even in provinces she has made her own, her rule is not regarded as so invariably beneficent as her admirers proclaim. The synthetic chemist thrives on the ineradicable desire of physicians and patients for a means to aid the body in its battle with disease, and remedy

after remedy is advertised into prominence, and supplanted when its claims prove to be largely unsubstantiated. What wonder that in this confusion, the wisest men should proclaim the limitations of their knowledge and be content to interfere little, if at all, with disease, and that they should look to preventive medicine to justify the existence of the physician to the State. They are wise in so doing. The physicians of public health are men with a fine record and a fair prospect, but the present generation may be excused if they lack ability to bear their own ills without repining, in the contemplation of a posterity to whom disease shall be unknown. For many a year to come medicine will have to give some answer to sufferers and produce what alleviation she can for their needs, and the eagerness with which any new suggestion of treatment is welcomed shows both the lack of faith in the older methods and the keen desire to discover better. In the midst of this anxious, sceptical majority, live the followers of Hahnemann. In England and Europe generally at any rate, they are physicians trained in orthodox methods and qualified under orthodox examiners. Curiosity, or that desire to in-

vestigate before pronouncing judgement, which would be praised as the true spirit of scientific enquiry if it led to conclusions more consonant with the views of the majority, persuades them to make trial of Homœopathy, and they are converted to a belief in the rule *similia similibus curentur*, as a rule of practice that enables them to achieve better results in alleviating suffering, than those they could reach before. If, however, they seek to proclaim the truth they believe themselves to have found, they fall under the ban of official condemnation. The law of Britain recognizes them as the full equals of the members of the "compact majority," but all the weight of authority is against them. If they send records of cases cured by Homœopathic methods to the ordinary professional journals, these records will be refused; if they seek the help of an expert in difficult cases, they run the risk of denial of aid; if they wish to become members of medical societies, they may have to suppress the fact of their therapeutic heresies. For years the publishers of *The Medical Directory* refused to print any record of hospital appointments, or contributions to medical literature, that bore the impress of

Homœopathy. Yet, when under stress of this outside pressure, as well as for mutual help and encouragement, homœopathists formed their own societies, opened their own hospitals, published their own directory, they were at once denounced as schismatics, and to their other sins was added the crime of creating a division in the medical profession. Now if the leaders of the profession, who, with few exceptions, seldom refer to Hahnemann without a sneer, or to Homœopathy without a gibe, if these physicians were known to have made an exhaustive study of the subject, and by personal experience proved its claims fallacious, even then, as teachers of the new generation of medical men, they surely should say, "These claims are made by certain men, our own experience does not confirm them, but as long as they command support it is better you should investigate them for yourselves." This would be straightforward, since it cannot be said that medicine is in so satisfactory a condition that it can afford to neglect help from any quarter, however apparently unpromising. But the real state of affairs is far otherwise. The student hears Homœopathy dismissed with a sneer by

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men who, however distinguished, have *not* made any study of it, who frequently have no knowledge of its aims and practically never any acquaintance with its literature or its practice. Some years ago, a correspondent, writing to one of the leading medical journals, asked for a definition of Homœopathy, or a reference to a book on the subject. The editor's reply was that he knew of no book to recommend, and that, without doubt, the definition of Homœopathy would be found to have varied greatly from time to time. Homœopathy, which of all the principles of therapeutics enunciated a century ago, is the only one that has kept its banner flying and increased the number of its defenders! Yet this was the editor of a leading orthodox journal, whose authority in medicine was unquestioned. What wonder, then, that the majority of the profession condemn homœopathists as KNAVES OR FOOLS? They trust their leaders, they assume too hastily that their leaders speak with knowledge as well as with authority, and, therefore, dismissing Homœopathy as a variety of quackery, they go to swell that great body of opinion, that "compact Liberal majority," whose existence is invoked as the final proof of a

conclusion founded on ignorance and buttressed by prejudice.

Let it be granted here, however, that the last twenty years have seen a certain change in the attitude of the profession at large towards Homœopathy. Whether through a leaven of liberality of thought, or a belief that persecution produced only a renewed fervour of conviction, the older attitude of abuse and opposition has given place to a contemptuous tolerance and an ignoring of the very existence of the troublesome subject. The wish that the sect should become extinct has been father to the thought that extinction is at hand, and till that end is reached it has seemed better to leave the matter severely alone, while the triumphs of surgery have supplied a definite constructive policy that has helped to cover the comparative failure of medicine. But Homœopathy has survived contemptuous toleration as well as active persecution, and its adherents have been able to make use of the advances in surgery without ceasing to urge the superiority of their rule in therapeutics. The profession is still divided, the situation is unchanged. Small the sect may be, but it is persistent in Britain, in France, in Italy

The Situation

and in Germany, and in America it is more than a small minority, since it has its colleges and its place on examining boards. Meantime, the question of the relations of the medical profession to the State is coming rapidly to the front. The next half century must see a wholesale readjustment of those relations. Imminent is the change of the profession into a vast branch of the Civil Service, into an army for the preservation of life, not for its destruction; into a priesthood of health, an order bound to the struggle against disease. Doubtless, the dead weight of numbers and the power of established position may, in this case, avail to exclude homœopathists from such a body, or to ensure their practical exclusion, but it is almost certain that were that to come to pass, the schismatics would remain, a protesting minority rebellious to the general authority. They have succeeded, in spite of strong opposition, in gaining equal State recognition and public support. Is it so certain that they could not maintain the struggle even against better organized forces? Is it not credible that, so maintaining it, they would remain a source of weakness to the authority of the profession at large? Medicine must not be

divided against itself if it is to reach the place it should hold in the life of the nation. The rift is small, it may seem negligeable, but a rift it is and a source of lessened power. The Situation

This is the situation. Shall chance be the final arbiter? Shall scientific men manage their business so ill? The Church is wise to base herself on the sentimental rock of infallibility, and treat those who impugn her basis as a mother treats her erring sons. In science there is no room for sentiment. Science must face its problems, and must, by reasoned endeavour, find for them a solution. Futile is the hope that a policy of blind negation may avail to establish truth.

II

SAMUEL HAHNEMANN AND HIS TIMES

Samuel Hahnemann and his Times

IT is difficult to form an impartial conception of any man, who, in the sphere of art or morals or science or politics, has enunciated opinions which are at variance with the accepted doctrines of his day. This is a truism too obvious to need statement . . . were it not that recognition of it is generally accompanied with a comforting belief that truth is bound to prevail in the long run, and that time may safely be left to proclaim a just judgement. This belief encourages laziness of thought, because it absolves from the effort of independent enquiry and the effort to obtain independent opinions. Prejudice may guide our conduct now, while we reflect that posterity will in some way, not clearly explicable, be possessed of materials for pronouncing an even-minded sentence. The pioneer, it is true, has always his forerunners. His opinions, that seem such startling innovations, have always sprung from thoughts of his spiritual ancestors;

and although, by experiment and enquiry, he may extend a new conception so startlingly, that to his contemporaries he seems an isolated phenomenon to be cursed or blessed (usually cursed), the student of history can trace his ancestry and establish his position. But the student of history is a rare exception among the masses of mankind. To those to whom the new doctrine is a revelation, the pioneer who has extended the scope of knowledge appears as something more than human. The benefits obtained from the first timid applications of the new principle make unprejudiced enquiry increasingly difficult, and if the master's doctrines meet with opposition, then gratitude blends with loyalty till the claims of the disciple exceed anything the teacher himself may have demanded. On the other hand, the pioneer in science necessarily challenges existing conceptions as soon as his new facts appear incompatible with them, and at once brings upon himself the determined enmity of all whose reputation or interest, or, most of all, whose mental inertia is thereby set in danger. History shows most conclusively that in the matter of new conceptions there is no judge so liable to error as the expert in the

old. In achieving expertness he has used up much mental energy, and very probably reached that first milestone in the kingdom of old age, the state of inability to understand new ideas. To him a new conception means indeed " more study," and that for a problematical advantage. If the new " truth " prove true, his reputation, founded on the old, must be shaken, and he has probably no longer the energy to acquire expertness under the later conditions. Therefore, not malign calculation, but inertia and sub-conscious self-interest, make the expert unsafe as a guide. It was the men who had made fortunes out of manufacture, and were experts in trade, who prophesied that the Factory Acts would ruin both; it was musicians who condemned Wagner, and painters who refused academic recognition to Rossetti or to Whistler. Therefore, from the beginning it must be recognized that the man who propounds a new idea, which, if adopted, will revolutionize the practice of any art, will never obtain justice with the present organization of society. Friends too enthusiastic, and enemies too prejudiced, will together combine to destroy any chance of dispassionate investigation, and

both sides will go into the fight waving banners on which will be inscribed their devotion to truth, their passion for humanity and their freedom from self-interest.

Hahnemann and Hahnemann's teachings have not escaped this fate. Now, however, more than a century has passed since the first statement of Hahnemann's principle, and more than half a century since the publication of his latest views on disease and its cure. Now, therefore, it should be possible to examine the man and his ideas with some attempt at impartiality, especially since the trend of medical opinion and general scientific advance have led us to a point where those ideas appear less startling and revolutionary than they seemed to Hahnemann's contemporaries. Much water has flowed under the bridge in a hundred years. Medicine, having lost faith in much "active" treatment, has now become sceptical, whereas formerly it was filled with the ardour of a rival faith. Gallio was a better judge in the famous cause than either Paul or the leader of the Jews could have been, and though he retains a traditional tendency to dismiss both sides without distinction, he is unlikely to tip the beam against either.

Samuel Hahnemann and his Times

Whatever opinion may be held as to the truth of Hahnemann's distinctive doctrines, no student of his life can deny that he was a man of ability, a man of originality and perseverance. Toward the end of his life rancour pursued him: and that rancour, even now, helps to blind most medical men to his powers. He figures in the mind of the profession at large as, at best, a wild speculative dreamer; and at worst, as a designing charlatan. Though Dr Bristowe, for example, did conspicuous justice to the man while rejecting his conclusions, and though other generous estimates have been forthcoming, yet the fact remains that the earlier conception of Hahnemann's personality bears an official stamp, and is accepted unthinkingly by the majority of the profession.

Hahnemann was born in 1755, at Meissen in Saxony. The first experiment that led him to his conception of the law of Homœopathy, was made in the year 1790, and it was not till the year 1796 that he published his first statement of his belief in it. During the thirty-five or forty years before he drew upon himself the enmity of the mass of the profession, he had acquired reputation both as chemist and as physi-

cian, and from his linguistic accomplishments, was not only familiar with scientific thought in all European countries, but able to translate it for his countrymen. The poverty of his father made education a difficulty, only surmounted by his intense desire for knowledge and persevering pursuit of it, characteristics which so won the hearts of his earlier teachers that they aided him to the best of their power. From the age of twenty he supported himself, and found the means to continue his studies by teaching and translating, but it may be truly said that the knowledge he gained he fought for, and if ever praise were due to perseverance and love of learning, that praise should be allowed to Hahnemann. He received the degree of Doctor of Medicine at Erlangen in 1779. He was then Master of Greek, Latin, English, Italian, Hebrew, Arabic and Spanish, besides his native German. Learning is not wisdom, but it may be a means to it, and, at least, Hahnemann was master of sufficient learning. As he studied these languages primarily in pursuit of the professional information they might contain, he came incidentally to possess a very wide acquaintance with past and contemporary

medical knowledge. If he attempted to introduce a new conception into medicine, he spoke at least with a very complete mastery of the old. His were not the visionary theories of an ignorant man, but the opinions of a physician of learning and experience. Side by side with the growth of his purely medical acquirements grew his knowledge of chemistry. Chemistry and medicine are inevitably interdependent, and the stirrings of new thought in the realm of the first science drew the attention of Hahnemann. Though largely self-taught, he showed great insight and aptitude for chemical investigation. He appears first as a translator of chemical works, but throughout his translations he is constantly adding annotations drawn from his own experience and that of others, and shows no less originality of mind than wide knowledge. Indeed, he frequently corrects and amplifies as well as translates. The distinguishing features of his mind, as shown in this class of work, are desire for certainty and accuracy of measurement. In 1786, having won some fame as a chemist, he published a book on *Poisoning by Arsenic*, its treatment and judicial investigation. It is quite a masterly work, and embodies

much original research. Some idea of his desire to neglect no possible source of information may be found in the fact that he quotes from 389 different authors, giving all his references with painstaking accuracy. Surely this is not the method of an unbalanced, imaginative dreamer. His recommendations for the regulation of the sale of poisons by chemists are those now enforced, and form an additional testimony to his practical good sense. He made many other contributions to chemical knowledge. Among them may be mentioned his "Wine Test." He seems to have been the first to discover that sulphuretted hydrogen in *acid* solutions precipitates arsenic, lead, antimony, silver, mercury, copper, tin or bismuth, but not iron. Till this discovery there was no means known of distinguishing readily iron from lead in solution, and wine-dealers were often accused of adulterating wine with sugar-of-lead (a criminal offence) when the metal found was in reality iron. From 1793 to 1799 was published his great *Apothecary's Lexicon*, treating of everything relating to drugs (their preparation, chemistry and medical properties) that can be of use to the apothecary. It is a monument of laborious

research illuminated by an original mind, and received much well-deserved praise from contemporaries who had no sympathy whatever with the opinions for which alone the name of Hahnemann is now remembered.

Naturally there is no intention here to deny that Hahnemann shared the limitations in knowledge of his time, that his views were often erroneous and his conclusions inaccurate. But it is contended that he shone among his contemporaries for sound judgement and power of clear thinking, that his desire for accuracy enabled him to correct error far more often than he perpetuated it, and that he never hesitated a moment in acknowledging any mistake he had made as soon as he realized it. Thus his experience in the case of the so-called "Alkali Pneum," when he believed himself to have discovered a new salt, which proved to be the substance Borax, already fairly well known, really redounds to his credit. He admitted his error at once, as soon as he was aware of it, and refunded the money he had received. Unfortunately, he was already a man with many enemies who endeavoured to mark him as a wilful deceiver, whereas he was at

worst the victim of a mistake of a kind which the chemical annals of the time could parallel over and over again.

Samuel Hahnemann and his Times

His later views of the action of drugs were deemed so fantastical that subsequent generations have thought of him as a wild speculator of unbalanced mind and confused judgement. Few have been able to conceive the practical, cautious bent of his intellect, proceeding always by choice, not from imagination but from experiment to conclusion. But just as the contemporaries of Paracelsus handed on little to the next generations but his name Bombastes, leaving our own century to do justice to his genuine abilities, so the contemporaries of Hahnemann handed on his name as a synonym of fanatical folly so successfully that all knowledge of the real man is obscured by the confusion of contest in which vituperation is substituted for enquiry. Yet it must not be forgotten that before Hahnemann became the founder of Homœopathy, he was well known as a physician and contributor to medical knowledge. He was an indefatigable translator of medical works; and as in chemistry so in medicine, if he went astray it was at least not from igno-

rance of the best that was known in his day.

It is difficult, or impossible now, to conceive the state of medical knowledge in the years 1750 to 1800. Hoffmann attributed disease, or most disease, to impure and acid humours; Stoll to the influence of constitution, determined by the "prevailing weather and epidemic fevers," and "gastric impurities," especially bile, were the approximate causes of most illnesses. Kampf deemed most disease to arise in the abdomen from "infarcts," a term, however, to which the modern pathologist attaches a slightly different meaning. His remedies were mostly enemata, and two or three daily would be prescribed for long periods of time. "Stasis, stoppage, obstruction," these are the names that, for most physicians, sum up pathology, and the remedies are naturally sweating and purging, bleeding and salivation. The theory of John Brown was that health is determined by the possession of the right amount of "irritability." Too much or too little causes disease, "sthenic" or "asthenic." Remedies are classed in a corresponding manner, and the treatment of illness is simple enough. The chemical discoveries

of the latter half of the eighteenth century gave a great impetus to the formation of new conceptions of disease, and views as to influence of too much or too little oxygen or hydrogen or nitrogen, or some other element in the system, were widely prevalent. Many physicians went from one theory to another, and in therapeutics the patient could be treated by a variety of methods, " evacuant " or " stimulating," " strengthening " or " weakening," " softening," " antagonistic," " restorative," " astringent," " relaxing," " derivative," " antiseptic," and many more. Prescriptions quite commonly contained eight, ten or more drugs, nor was there any widespread dissatisfaction with the condition of medical knowledge. Most physicians emulated the optimism of Dr Pangloss, but, in truth, there does appear to be some subtle relation between the study of medicine and a certain supreme self-confidence, which has enabled doctors of all ages to claim unquestioning faith from the laity in a constant succession of dogmas.

It was, then, under these general conditions that Hahnemann studied and practised. From the first he maintained an open mind toward any treatment that

promised improvement on ordinary results, sound common sense that gave authority due weight, yet not too much, a habit of observation and a belief in cautious experiment. His first medical work of importance dealt with the radical cure of chronic ulcers. Already here he laments the absence of any reasoned basis for drug prescribing. Though he recommends bleeding under some circumstances, he condemns its excessive use; he is an enemy to coffee and a great advocate of open air and exercise. Indeed, in the importance he always attached to questions of diet and general hygiene he was much in advance of his age. He was a great believer in the benefits of cold water, and regulated every detail of its use. His local trea ment of chronic ulcers and fistulæ would not today be considered undesirable, and though he employs internal remedies in considerable doses he already shows a fondness for prescribing one drug at a time. His next work deals with the treatment of venereal disease, and obtained much praise. The preparation of mercury he invented and recommended here was much used by all physicians, and is still in the German pharmacopœia. But in no respect does he

show more clearly his intellectual superiority to the ideas and practice of his day than in his treatment of the insane. At a time when torture and chastisement were the accepted methods of dealing with mental disorders, Hahnemann writes: "I never allow an insane person to be punished, . . . and they are always rendered worse by rough treatment, and never improved." In 1792 he cured, by his humane method, Klockenbring, a distinguished man at that time, whom the usual brutal treatment had (not unnaturally) failed to relieve. He won considerable fame thereby; but the opposition which soon after was roused by any mention of his name prevented the full benefit of his reasonable views of insanity from affecting general treatment, and by the time the methods of Hahnemann had become commonplaces of medicine his name suggested to ordinary ignorant opinion rather the subject than the physician for mental therapeutics. But if Hahnemann was in advance of his age in his ideas for the treatment of the insane, he even more markedly anticipated later conclusions in his suggestions for dealing with epidemics. Years before any publication of "germ theories," he is

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found preaching the necessity of compulsory notification and isolation of infected persons, the value of abundant fresh air and the dangers of conveying disease by clothes and excreta. Indeed, it is not too much to say that his practical common sense led him to conclusions that would serve as a useful guide to public health authorities to-day. He made many other contributions to medical knowledge, and was known and honoured throughout Germany among medical men, receiving academic distinctions as well as the praises of his contemporaries. In 1798 Hufeland refers to him as "one of the most distinguished physicians of Germany." Withal it must be remembered that Hahnemann had an intelligence that detested vagueness of thought and slovenliness of statement. Having spared himself no pains in observation, experiment, or study to arrive at just conclusions, he was apt to deal contemptuously with statements of opinion that seemed to him founded on less mental effort. But whatever our time may think of his constructive labours, his destructive criticism of his opponents would seldom fail to find support to-day. He realized fully the chaotic state of medicine in his

time, and set himself to indicate the path to order. He not only practised but preached most energetically, before as well as after his formulation of Homœopathy, the necessity for simplifying prescriptions and using one remedy at a time, if ever any trustworthy knowledge on the subject of drugs was to be accumulated. Time has been long in justifying his views, but although the compound prescription (not to say the compound tabloid) is still not absolutely unknown, the simplification of drug treatment is now a commonplace of medicine. Although his condemnation of the bleeding, purging and salivation of his day is mainly associated with his later life, he was never a friend to their use in anything but great moderation, and indeed, though it may have been his enthusiasm for his own cause that made him so bitter against these practices, there are few to-day who will not admit that he was wise to protest against them as he did, and that he has been justified by their complete modification, if not by their abandonment.

The claim is therefore made for Hahnemann, that he was intellectually far superior to the average physician of the eighteenth century. His intuitive grasp of

the essentials of a problem and his power of thinking clearly enabled him to anticipate conclusions, that could only be demonstrated by the slow accumulation of observation and the experience of many men. Such were his conclusions in regard to the treatment of insanity and the hygiene of epidemics, while he certainly anticipated the discovery of the nature of some contagious diseases, in attributing them to what he calls " small animalcules." He was led to this opinion from observation of certain cutaneous diseases, but when he had opportunities of studying cholera, he attributed this also to the influence of a living organism.

Till the year 1790, therefore, Hahnemann appears as a physician, deeply interested in drug action, studying chemistry to gain insight into drug structure, and recommending the prescription of one remedy at a time, so as to win precision of knowledge as to its action on the human body. But already he had realized that no complete materia medica could be founded on the study of drug action on disease alone. Information so gained must be supplemented by experiment upon the healthy. This was no new idea; Haller had suggested

it, Gesner, Störck, Cullen and others had actually recorded the results of such investigations, but Hahnemann was the first to maintain the necessity of systematic enquiry, and to contribute more than any man, before or since, to this branch of knowledge. In 1790 Hahnemann was engaged in translating the latest edition of Cullen's *Materia Medica*. Dissatisfied with Cullen's explanation of the power of cinchona bark in ague, he made the experiment on himself of taking (while in good health) a considerable dose of the drug. The consequence was the appearance of a series of symptoms closely resembling those of a paroxysm of ague, symptoms that were repeated when he repeated the dose, and ceased when he ceased to take it. He noted the resemblance of the drug symptoms to the symptoms of the disease which the drug usually cured, and decided that its action was to set up an " antagonistic fever," which counteracted the ague fever. He had already spoken of a " mercurial disease," in dealing with the treatment of syphilis, and had observed the resemblance of the symptoms of mercury poisoning to those of that malady. This second example of a drug disease resembling, yet

counteracting, a natural disease, sowed a seed in his mind from which a vigorous growth was destined to spring.

Much discussion has taken place as to whether these observations of Hahnemann on cinchona were genuine effects of the drug. They are certainly not among the invariable consequences of a massive dose, but there is ample evidence among observers, untainted with the heresy of Homœopathy, that cinchona and quinine can occasionally, if not frequently, produce a "febrile disturbance" of light rigor, heat and sweating, similar to a mild paroxysm of intermittent fever. Trousseau and Pidoux, indeed, claim the discovery of this effect of cinchona for Bretonneau, ignoring Hahnemann; and Professor Lewin in his *Nebenwirkung der Arzneimittel* expressly notes it among the consequences of taking quinine, mentions Hahnemann's experiment, and endorses his observations. A favourite counter explanation is that Hahnemann had, in earlier life, acquired ague, and that the cinchona revived the latent poison, so that he was attributing to the drug symptoms in reality due to new activity of the *plasmodia malariæ*. Even then, this explanation implies that

ague is to be cured by a remedy which can stir latent ague to activity, that is, a remedy which approximates to the action of the disease poison, but in any case neither Hahnemann, nor any of his followers, ever sought to found a general law on the basis of a single experiment. From 1790 to 1796, and from 1796 to the end of his life, the founder of Homœopathy was determining the action of drugs upon the healthy, and using the symptoms so produced as indications for the use of these drugs in disease. Neither he nor any other observer who has brought the requisite knowledge and patience to the task, has ever been disappointed. In precise proportion to the exactitude with which a drug can reproduce the symptoms of disease on a healthy body will it alleviate those symptoms when they occur in the course of a malady. Tissues once destroyed cannot be restored, and diseases constantly occur for which no remedy seems exactly parallel. The field of materia medica is wide. Even now only a fraction of the possible remedies are well known, but the more nearly the homœopathist can match his medicine to the disease, the more confidently he prescribes it and the more certainly his confidence is justified. There-

fore, even if Hahnemann's cinchona experiment be doubted, Homœopathy has a sure enough foundation without it in the countless other remedies that have been found to answer to the law of similars.

Hahnemann, still regarded by many as an impulsive and fantastic theorist, worked till 1796 to collect further evidence in favour of the law which his experience with cinchona had suggested to him. He then published the first statement of his opinion in *Hufeland's Journal*, one of the leading medical papers of his day. He states his theory, argues in its favour, adduces the results of poisonings, his own experience in testing his law, and records symptoms produced by various drugs upon himself and others, for he had already begun to test drugs, to " prove " them, in the homœopathic phrase. At this date he recommended doses, in most cases smaller than those ordinarily used, but not very much smaller. Before 1790 he had published his opinion that the doses given of many drugs were generally too large, and it is evident that as soon as a medicine is given, which acts in the same direction as disease is already acting, the risk of aggravation must be faced, and that the natural

way to avoid this is to diminish the dose. But it is not till 1801 that he gives the first hints of his discovery of the power of very minute, and even of infinitesimal doses. From this time onwards he becomes more and more addicted to their use, but till 1827 he evidently believes the most suitable dose to be a quantity varying with the patient and the disease, and recommends different dilutions of different drugs. In 1827, when he published his theory of *Chronic Diseases*, he attempted to fix a scale of dilution at a far higher level of minuteness than he had customarily used before, but he himself found it impossible to keep to it, and to the day of his death varied the strength of varying drugs. Let it suffice to observe here that during the whole of his career, however apparently fantastic his teaching, it is always to experience he appeals. He begins to use small quantities, then smaller, then infinitesimal, because he finds good results follow their use. Practice precedes theory. It is true that he was full of conceptions of " vital force " and " drug force," which easily led him to conceive power as distinct from matter, and finally to formulate a theory of " dynamization," whereby subdivision

was held to increase the power of a remedy. That this last is true, to some extent at least, is a matter of everyday knowledge. A quantity of mercury that might be swallowed almost with impunity in the metallic form, would speedily produce unpleasant consequences if taken as blue pill or grey powder, therefore the first steps of Hahnemann's progress are reasonable enough. As to the later ones, there is only one test for science, and that is experiment. It was to this that Hahnemann always appealed, and by this that he held himself justified. He has not lacked followers in his apparently most incredible practices, and they claim, as he did, to have been guided by their results from point to point, and justly resent the condemnation of those who have shirked the practical test. More must be said on this point in a later chapter. It is enough to assert here that there is one, and only one, fundamental doctrine in Homœopathy, the doctrine that guides the choice of the remedy. If a drug is given in disease which can produce similar symptoms on the healthy, Homœopathy is practised, whether grains or drops be given, or fractions, even infinitesimal fractions, of either.

From 1796 to 1805 Hahnemann and a few enthusiastic disciples continued their studies in the action of medicinal remedies upon the healthy, and in the latter year the first instalment of their researches was published. It deals with some twenty-seven drugs. Obviously, investigations of this kind were essential before the law of "similia" could be tested, and the indefatigable patience and industry of Hahnemann are nowhere more evident than in the number and extent of his contributions to the *Materia Medica*. In his day, instruments of precision for the measurement of physical effects were few or non-existent, and the records are therefore largely of the "prover's" sensations, as well as of the definite skin eruptions and pulse accelerations or retardations, the vomitings and purgings, that are objective results of the drug taking. Nevertheless, the subjective records are controlled by the fact that each drug was proved on several persons, and there is ample evidence in the account left by one of the original "Provers' Union," that Hahnemann exercised the greatest care and patience in order to get accurate results, and was on his guard against the effects of sug-

gestion or imagination. But there is more than this to be said. These records have been tested practically for years. The symptom that failed to justify its existence, by being removed by the drug when found in disease, was soon discarded, and the general trustworthiness of the mass of homœopathic provings is constantly being tested in the only practical way. The provings of Hahnemann have stood the test nobly.

In 1806 a pamphlet was published on the general theory of Homœopathy. It formed a kind of preface to the great work, *The Organon*, which appeared in 1810. This is the most complete exposition of Hahnemann's doctrines. It begins with an analysis of contemporary methods in medicine, and continues with examples of cures made by physicians unknowingly, in accordance with the law of similars. These instances range over all medical literature, from Hippocrates onwards, and are testimony to the labour and erudition of Hahnemann, while the completeness of the record testifies to his care and accuracy. The rest of the volume is a full statement of the fundamental law of Homœopathy.

From this date, till 1827, Hahnemann

laboured at the *Materia Medica*. The result of his toils, and those of his devoted band of followers, appeared in four volumes, between 1811 and 1821, known as the *Materia Medica Pura*. These constituted the armoury of Homœopathy; henceforward he who wished to test the law had the means to his hand. The work consists mainly of records of effects produced by drugs on the healthy, with indications for the dosage hitherto found most suitable in Hahnemann's experience. This account is no biography of Hahnemann, but it must not be forgotten that, from 1796 onwards, he had to deal, in ever-increasing volume, with attacks and misrepresentations of all kinds. He was a keen controversialist, and his defences of many points connected with his doctrines are to be found in the publications of these years. It may be of interest also to mention that in 1812, in order to obtain the privilege of lecturing at Leipsic, he brought forward and defended a thesis on the Helleborism of the Ancients, and showed such a wealth of learning and such evidence of industry that, although already a man of many enemies, he received general congratulations and applause.

In 1828 appeared the book on *Chronic*

Diseases and their Treatment, the last of Hahnemann's great contributions to medical literature. He relates that for some ten years he had been trying to find an explanation for the fact that while he could relieve the symptoms of chronic diseases with success, these symptoms were apt to recur, and the true cures of these conditions were not as numerous as he felt they should be. In this work he gave his explanation and the treatment he founded on it. He taught that there were three great poisons which lay behind all chronic disease—syphilis, sycosis and the famous "psora." The last was the most widespread and important. It manifested itself usually in the form of a cutaneous eruption, but if this eruption were " suppressed " by too vigorous local measures, " internal psora " resulted, a chronic disease which thenceforward dominated the patient's life. It is unfortunate that Hahnemann chose the name of psora (itch) for his " miasm." He knew of the parasitic nature of true scabies, and his psora covered practically all cutaneous disease, but by choosing the name of one variety (and that mainly a local one) as the name of his fundamental poison, he exposed his theory to misunderstanding

and ridicule. As a matter of fact, he seems to have been trying to find expression for the groups of physical characteristics later physicians have spoken of under the headings of Diathesis. When he said that a patient was "psoric," the mental image was akin to that implied by the phrase "gouty tendency." The vagueness of either term is repugnant to the modern mind, but the fact is generally recognized that there are many chronic conditions which affect every manifestation of disease in certain constitutions and that need to be considered in treatment. The tissue reactions of the chronic sufferer from tubercle differ from those of the chronic sufferer from syphilis. To meet these conditions he introduced a new group of so-called "antipsoric" remedies. They were deep-acting in their nature, and were supposed to combat the deep "miasm." They were selected by the law of Homœopathy, but the specific indications were looked for rather in general constitutional appearances and symptoms than in more local signs.

By no means all of Hahnemann's followers have accepted this, his last doctrine, in its entirety. There are few but have

found the "antipsoric" group of remedies useful when given in accordance with his indications; in other words, they have frequently endorsed the practice, even though they have been doubtful of the theory. It must be remembered that here, as elsewhere, the appeal is always to experience. Those of Hahnemann's disciples who have accepted his general conception of chronic disease and extended its range, are certainly the physicians who treat chronic diseases with most success, and their report is that their belief is founded on their experiments. Having tested the theory, they find it one that leads to satisfactory results, and those who scorn the doctrine in any form are mainly those who have been at little pains to try it. There are few who would wish to maintain it as it was written. Exact information has increased and the old theory must be read in the light of the new knowledge, but after all it is a conception that can be practically tested, and if it leads to good practice, increasing experiment may point the way to fuller and more accurate expression of the truth that underlies it. In any case the doctrine of chronic diseases is no

essential part of Homœopathy—a physician may reject it entirely and yet not be absolved of the name of heretic if he chooses his remedies by the law of "similia." There is one, and one only, fundamental teaching, and both for it and for its subsidiary doctrines there is no test but experiment. Homœopathy rejects rightly all *a priori* reasoning. Why theorize if the path of experience is open?

These are the salient features of the life and work of Samuel Hahnemann. Surely it is evident that, however mistaken, he was no shallow dreamer, but a learned and laborious investigator, following truth as best he could, by no path but that of trial and the patient record of result. No wonder the mental balance of his contemporaries was disturbed by teaching so revolutionary. Small wonder that they preferred vituperation to argument and dogmatic assertion to experiment. Hahnemann faced the experience of all pioneers, and though the reception of his doctrines does not demonstrate their truth, history confirms the belief that new truth has seldom been met in any other fashion. By now the bitterness of controversy is passed. Differ

from him as we may, no one can deny that he has left an indelible mark on medical practice. Is it not possible at last to see him clear of the mists of passion, and confess him one who toiled with no small effect in the cause of suffering humanity?

III

THE TREND OF MODERN MEDICINE

The Trend of Modern Medicine

ONE hundred and fifteen years ago, the Emperor Leopold, suffering from (apparently) undiagnosed empyema, was bled four times in twenty-four hours. The reason for each successive venesection was that the former one had produced little or no improvement. He died in forty-eight hours. On this occasion, although his distinctive principles were not yet fully formulated, even in his own mind, Hahnemann criticized the treatment of the case with a just severity. But this example is only one, and that not extraordinary, of the treatment of a century ago. The followers of Brown swore by opium, and would give ten to twelve drops of laudanum every quarter of an hour in typhus until sleep was induced, whereon the dose was doubled and gradually further increased " till the health of the patient could be maintained by less powerful stimulants." In 1793 the usual dose of arsenic seems to have been

one-fifth to half a grain, or more; not unnaturally, Hufeland pronounced it too dangerous to use. Of the elaborate and complicated prescriptions mention has already been made, and salivation and purging, like bleeding, were held by most physicians to be under many circumstances essential to salvation. To-day the pendulum has indeed swung over. Faith has been lost in almost all active medical measures, and when surgery is unavailable, nursing and diet and general attention are relied on to do most that the physician considers possible to be done. The use of drugs, however, the matter that principally concerns us here, is by no means abandoned, and it is proposed in this chapter to give a few instances of the way in which medical thought and medical practice have, during the century, approximated more and more to the principles of Hahnemann. The law has been denied and rejected, but instances of practice founded on nothing else (albeit discovered empirically and without conscious recognition) are numerous, and there seems a growing tendency, though as yet a faint one, to consider Hahnemann as less of a fool than his contemporaries held him.

The Homœopathist is inclined to make a claim to the profession at large that may be worded thus: "I maintain that Hahnemann and his followers have influenced your practice in many ways. Their success with means that appear to you purely negative, has induced you to reconsider the active measures you used to employ, with the result that you have quietly abandoned most of them; and I further maintain that just as before Hahnemann experience occasionally found a remedy that would apparently cure the condition it was capable of producing on the healthy, so since his time accidental experience has led you to use remedies which are 'similar' to the disease conditions for which you employ them. These experiences are, to me, instances of the fulfilment of a law, whose general application you persistently deny, but I maintain that the instances you yourselves have accidently discovered are numerous enough to make it incumbent on you to make investigations, by which you may discover whether these experiences are mere chance coincidences or no. For my part, I claim that the law of Hahnemann expresses a truth concerning the reaction of protoplasm to all stimuli (including drug stimuli),

and I maintain that a case for enquiry, at least, is well made out."

Such might be the claim of a disciple of Hahnemann. It may be objected that, although orthodox medical practice contains many instances of relief to disease conditions by drugs, whose action resembles that of the disease, yet these experiences are isolated and seem to be readily forgotten, a testimony to their accidental nature. The answer is a statement that cuts to the root of the difference between homœopathic and orthodox practice. The formula that the physician must treat the patient and not the disease is one that is in the mouths of all teachers of medicine, but as orthodox medicine recognizes only broad distinctions between patients, the actual practice is necessarily concentrated mainly on the disease, as far as drug treatment is concerned, and drug treatment consists in considering a list of remedies that are recommended for the disease in hand, and choosing as fancy or former experience dictates. If A fails, the practitioner can proceed to B, C or D, but of any guide that should indicate to him which patient needs A, and which B, he is generally ignorant. That is to say, he prescribes empirically, with

greater caution than his forefathers, and less credulity, but with little more method. Therefore, if by chance he hits on a remedy that seems to aid his patient, he can merely add it to his list for the disease in question, and try it on the next case of the same disease.* The homœopathist, on the other hand, does treat the patient. He believes his remedy must have a direct relation to that particular patient, and by the symptoms the patient manifests he is guided to drug A, B or C. He knows not only that opium in small doses will cure constipation sometimes, but also what kind of case it will cure, and when it is useless to expect help from it. He may easily be mistaken, the signs are often confusing; but at least he has a method, and the greater his knowledge of drug symptoms, the more surely he hits

* It would be unjust to imply that physicians have no other guide in prescribing than empiricism. Most men frame theories of disease, and often prescribe in accordance with deductions from their theories. But the results of "rational" treatment of this kind have not been successful enough to prevent a constant sequence of new theories, and the remedies that hold their ground have mostly been discovered empirically. The chief therapeutical advance of our time is found in vaccine-therapy, which, to say the least, smacks of Homœopathy.

the mark. Therefore, these recommendations of homœopathic drugs for certain conditions that will presently be instanced are seldom of much use to the ordinary practitioner. He can but try them haphazard. If he happens to be lucky and his case is suitable, he will cure; as often as not his case is not suitable and the drug fails him; thereupon he blames the remedy, not his ignorant application of it. Consequently, while the homœopathist notes with interest the isolated instances of application of his law among the orthodox, he has little hope in that kind of permeation. It is only an extension of empiricism after all. Nevertheless, some instances shall be given, because the more independent observations are accumulated of the working of a law, the sooner it may hope for recognition. No attempt will be made to do more than give a selection from the numerous recorded experiences. Those interested will find more detailed information in Dr Dyce Brown's pamphlet on the *Permeation of Present-day Medicine by Homœopathy*. In no case is the slightest charge of ill faith brought against the physicians who have unconsciously "homœopathized," nor is their orthodoxy impugned. To the homœopathist they

have merely "builded better than they knew," and if they are indignant that a charge of even mitigated heresy should be laid at their door, he can understand their indignation and regret that it should blind them to further enquiry.

Eighteen hundred and sixty-nine was the year that witnessed the largest contribution to the dominant school of unconscious Homœopathy, but before that date and after it there have been many isolated examples of the practice. For instance, Dr Gairdner recommended the use of antimony (in the form of tartar emetic) in pneumonia, speaks of its therapeutic action being opposed to its physiological action, and of the necessity of giving a dose small enough to avoid the risk of superinducing the least degree of poisoning. He recommends one-tenth or one-twelfth of a grain, or less, as a dose in enfeebled subjects. Now, the power of tartar emetic to produce inflammation of the lungs was well-known when this was written, so that we find a small dose of a drug recommended to cure a condition it can cause. Its name implies its irritative action on the mucous membrane of the alimentary canal when given in any quantity, and it is interesting to the homœo-

pathist to find Trousseau and Pidoux expressly stating that antimony is more useful in those cases of pneumonia, where stomach and intestines were most irritable. That is to say, the more symptoms resembling those of antimony poisoning are present, the better the remedy relieves them.

The action of arsenic on the gastro-enteric tract is well known. It can produce a condition of vomiting and diarrhœa resembling cholera, and gastric pain is one of the earliest of its symptoms. In 1857, however, it was recommended by a correspondent to *The Lancet* as a remedy for cholera. Trousseau advocated it for diarrhœa and (in very small doses) for gastric pain and dyspepsia. It is almost the commonest remedy prescribed for skin disease (especially psoriasis), although its power of affecting the skin is well known, and a scaly eruption is the one it most often produces. That ipecacuanha causes nausea and vomiting is one of the first facts the materia medica student learns. It is, therefore, striking that it should be recommended (in small doses) to relieve the vomiting of pregnancy.

In 1868 and 1869 the use of aconite in fever, in small doses repeated frequently,

was introduced into general medicine. To-day its use is recommended in all medical textbooks. From Hahnemann onwards homœopathists had found this drug a potent aid in certain febrile states, guided to its use entirely by the symptoms it causes on the healthy. But note that, in consequence of the clue they possess in the symptom-records, the "ignorant heretics" know exactly when aconite is indicated and when it is not. Not all fever will respond to aconite, and the cases when it is waste of time to give it can be recognized at once by the real student of materia medica. It is only fair to add that Dr Ringer, in his writings, stated the conditions in which it is most likely to be wanted with a good deal of precision. Indeed, his article might almost have been written by a homœopathist.

The effect of cantharides on the kidney and the inflamation it can produce is universally known. Its use in nephritis is older than Hahnemann and has been "re-discovered" on various occasions during the last century.

Mercury to cure the kind of dysentery and diarrhœa it can produce on the healthy, nitrite of amyl for climacteric "flushings,"

turpentine to check bleeding from the kidneys, podophyllum to cure certain forms of diarrhœa, all these and many, many more can be found in orthodox works on medicine, and almost without exception when the recommendation is made, the necessity for a small dose is added. Nor has this unconscious " homœopathizing " ever ceased. In the index of a deservedly famous work on materia medica, lists of remedies useful for disease conditions are given under the disease headings, and remedies long used by homœopathists in just these conditions appear frequently. The description of the drugs in the body of the work seldom explains the relation the homœopathist knows to exist between remedy and disease. The medicines appear as the fruit of empiricism, but a recognition of their homœopathy would both make precise their application and explain their success. Dr Dyce Brown's pamphlet, already referred to, finds no fewer than eighty separate remedies, recommended by the most orthodox authorities at one time or another (many of them by several physicians) for conditions to which they are distinctly homœopathic. Surely, this is more than coincidence can explain. If haphazard experience selects eighty reme-

dies for certain diseases, and investigation proves that they, one and all, are capable of producing in health a condition similar to that for which empirical research recommends them, the possibility of a general law must strike the dullest mind. When, in addition, history shows that this relation of drug to disease has been noted from the days of Hippocrates onwards, the refusal to enquire further, and establish or finally refute such a general law, becomes little short of criminal, in view of the proclaimed powerlessness of modern medicine. But the case is stronger yet. The use of vaccination, as a prophylactic to smallpox is older than Homœopathy, but, not unnaturally, the followers of Hahnemann found the practice full of suggestion, viewed in the light of their beliefs. For what is it but an assertion that the poison of smallpox, modified by passage through an animal body, can rouse in the human body a resistance to the complete and unaltered poison. That is to say, a poison very like the smallpox poison can act as a prophylactic to it. Now, without entering on the vexed question of the efficacy of vaccination, the research of the past century, especially of its latter half, has made it practically certain that the root

principle is a sound one, and that the shortcomings of its application have been due to the difficulties of standardizing the amount of the virus either in quality or in quantity. The work of Pasteur carried the question well beyond the region of probabilities, and later workers have brought an extension of the principles of vaccination into well-deserved prominence. As at present practised, from the actual microbe of certain diseases, from the very poison, that is to say, of the malady, is prepared the remedy for the disease; and now that Sir A. E. Wright's "opsonic" technique has given a means of measuring the effect of each dose, the quantities required can be regulated with some certainty. As far, at any rate, as one of the vaccines is concerned (tuberculin), the small dose has been found advisable, even we may say a minute dose, as one-thousandth or one two-thousandth of a milligramme, or even less, is often recommended; but as has been previously maintained, the principle of Homœopathy is independent of the dose. Even if it be argued, as has been done, that the vaccination principle is not that of *similia similibus*, but of *æqualia æqualibus*, as the poison used for remedy is identical with

that of the disease (though it is arguable that the cultivation on an artificial medium does introduce an element of appreciable, though slight, difference and converts the idem into a simillimum), even then it must be admitted that there is the closest relation between the two principles, and it might well be conceded that, pending the day when the actual poison of all diseases could be used, the nearest approach to it should be the remedy desired by the wise physician. Correspondingly, we find that the pioneers of vaccine therapy have abandoned the orthodox attitude of contempt towards Hahnemann, and his name has been mentioned with approbation by Professors Pasteur, Roux and von Behring. Indeed, it is difficult to see how otherwise they could have acted with justice to their beliefs and their position of eminence.

There is no desire in this chapter to gladden the hearts of homœopathists or harrow the feelings of the orthodox by searching out diligently every single instance that represents, or appears to represent, an instance of the application of Homœopathy on the part of physicians who deny its truth. The issue at stake is far wider than a wrangle of sects; but surely

there is enough in the foregoing pages to suggest to anyone who may hitherto have regarded Hahnemann as a fool or madman and his followers as wilful misrepresentators or inaccurate observers, that there is some cause for him to walk more humbly, and enquire if perchance there may not be more of truth than he has imagined in the principle he has scorned, and less of true science in his attitude of lofty but incurious negation.

IV

KNAVES OR FOOLS?

THE final test of the homœopathic principle, whether there is any truth in it, and, if so, whether it be partial or absolute, lies in direct personal experience. If the physician knows the symptoms drugs can produce on the healthy, then he can match drug symptoms with disease symptoms, and find out for himself if the rule of selection advocated by Hahnemann is justified by its results. This appeal to the individual is the only convincing one. It is one that was generally refused in Hahnemann's day, and a refusal that was comprehensible in a state of knowledge that perforce regarded his suggestions as fantastic, has been generally continued, although the growth of information has, at least, rendered part of the case more plausible to the average mind. This is the unfortunate consequence of the bitterness and prejudice that surrounded the first statements of the new conceptions, and one of the objects of this book is to suggest that bitterness and preju-

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dice are unworthy of scientific men. The result, however, of their undeniable existence is to make it difficult for any man to apply the test of personal experience, the most conclusive one for the actual practitioner. To contribute, in however small a degree, to the removal of the difficulty, it may be well to consider here any general suggestions that may make the doctrine of Homœopathy less unattractive, and, further, to make a few comments on the principal obstacles to its progress as a medical theory. The only proviso that must be insisted on is that no amount of refutation of theoretical argument can counterbalance or replace the practical test. If any considerations in favour of Homœopathy seem to the physician unfounded, let him by all means reject them, but let him also remember that the results of practice can only be refuted by other and different results; and unless he is better pleased with the weapons of modern medicine than appears from most statements of authority, he is less than just to himself and his clients if he neglects any suggestion for improving them.

Bitter experience has taught the profession to be cautious over statistics. They

must always have a certain value, but actual circumstances seldom, if ever, supply us with long series of cases under sufficiently similar conditions, to make comparisons more than suggestive. As no physician ever insisted more forcibly than Hahnemann that no one case is ever quite like any other, even if external conditions are comparable, it is not for any follower of him to lay overmuch stress on the better statistical results that homœopathic treatment can show. Nevertheless, if the results are claimed as better in individual cases, they must, necessarily, be held to be better in the aggregate; and the claim is undoubtedly made. Homœopathy has attained to public recognition all over the world from the lay authorities, who draw no distinction in merit between the heretics and the orthodox, and this recognition is founded on the conviction that its results are generally so far better, that it deserves, at least, equal consideration. Thus in England better results, endorsed by non-homœopathic medical observers, were obtained under homœopathic treatment in cholera. The relative mortality was as 16·4 to 51 per cent in favour of the Homœopathic Hospital, and these results formed the support of

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the plea that led to the equal recognition by the State of all forms of medical belief. It has been argued that the relative success of Homœopathy in the years following its introduction was due to the fact that the "active" treatment in vogue at that date actually hindered, instead of helping, sufferers from disease, and that Homœopathy claimed success that was really due to the fact of non-interference. Truly, when it was possible to dress open wounds with powdered arsenic, when bleeding and purging and blistering and salivating were commonplaces of treatment, there can be little doubt that, if disease slew its tens of thousands, medicine must have gone far towards slaying, at least, its thousands; yet so firm was the belief of the profession in its powers, that it scouted then, as it is inclined to scout now, the suggestion that any good thing could come from the theories of Hahnemann, and was ready to stamp as criminal his neglect of the measures in which it put its faith. Time has shown the justice, at any rate, of his destructive criticism. Nevertheless, no honest enquirer can doubt that the mere cessation from "active" treatment enjoined by homœopathists, and their care in questions of diet

and hygiene, brought them many good results that they, in good faith, attributed to the efficacy of their law; further, in the former prevailing ignorance as to the natural history of many diseases, cases have no doubt been claimed as cures for certain remedies (not by homœopathists alone) that in reality were due to the natural defences of the organism. Make all these deductions, give nature her due, there still remains a margin of superiority claimed by the homœopathist. Indeed, he is less likely to underrate the value of the natural defence, inasmuch as his whole aim is to co-operate with it, and as far as statistics are available, they appear to support his claim. But realizing, as he must, the impossibility of establishing the case finally by figures alone, he appeals for the personal test, and is content to use statistics as an indication in his favour without over-valuing their importance. Remember that in all the countries of Europe the physician who adopts Homœopathy has had previous experience of the fruits of the different school of treatment. His knowledge, his skill, remain constant factors, and if he is convinced that he gets better results following Hahnemann than following the methods he has been taught,

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to what can he attribute the improvement, except to the efficacy of the new law he has come to recognize? Each practitioner of Homœopathy says: "I get better results from the one method than from the other, and I have tried both." This is direct evidence, and it is all the stronger since confession of this faith involves more or less professional ostracism and contumely. The strongest part of the case for Homœopathy is that its practitioners are so often men who have been converted from the ordinary methods, in spite of the price exacted for conversion. There are only three possibilities open. First, that they are honestly mistaken, that they are fools. But how can this be decided (as it is claimed to be decided) by men who have not made the necessary experiments? Science admits no *a priori* reasoning when experiment is available. Second, that they are not convinced, but pretend to be, that they are knaves. Again, the only arguments used are theoretical, and the difficulty of accepting this explanation becomes enormous on investigation. The genuine charlatan is a solitary soul, distrusting others of his kind, but homœopathists form societies and seek companionship. Further, why, if their aim is

fraud, burden their lives with the task of mastering intricacies of drug action, adding to their professional labours a duty of which orthodox practitioners can form no conception? Let no man delude himself that it is an easy matter to practise Homœopathy well. But if it is a fraud, why build up this elaborate structure for the sake of unnecessary toil? The explanation becomes absurd. Remains the third possibility that they are right, that they do get better results, and that they are repaid for ostracism and contempt by a sense of increased power over disease. Some may wish to insert a fourth possibility, that they are partly right and partly mistaken. This is an attitude not uncommonly adopted by more generous souls who find, to their astonishment, that homœopathists can know their work and be capable of human intercourse. It is a very dangerous attitude for the conscientious adopter. By what right does he deny to those who seek his aid the benefit of any truth there may be in Homœopathy? If once he admits that there may be, is probably, truth in it, he is condemned if he shirks investigation. It is his duty to define the limits of that truth and not withhold its power from those who trust their bodies

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to his care. Therefore, the first argument for Homœopathy lies in the conviction of those who profess it, practically the only men who have qualified themselves for an opinion. True, a few men have claimed to have investigated and rejected it, one or two have professed it and abandoned it; but, for the first class, it is necessary to know the nature and extent of their investigations in order to give due weight to their evidence, and for the second, when they have left Homœopathy they have seldom failed to take something of it with them. They are rather men who object to the label than to the practice. However, the difference of opinion is only another reason for independent enquiry, and science respects no man who excuses his laziness on the ground of another's activity.

So much, then, on the question of statistics and comparative results. They can but underline the need for personal investigation, they can never take the place of it. Before considering the special obstacles that impede the spread of Homœopathy, a few lines may be allowed to an attempt to show its central doctrine, under an aspect more suitable to modern conceptions of disease and life than appears at a first view.

Life is inextricably associated with the

activities of protoplasm, the fundamental constituent of all living cells. Protoplasm is remarkable for its power of modification of activity under different circumstances, for its power of reaction to stimuli, whether thermal, electrical or chemical. It can, however, be permanently damaged or destroyed by thermal, chemical or other agents, if they are applied in sufficient intensity. Now, what is known as the power of resistance of the system to noxious agents is a power that varies in detail, inasmuch as to different enemies a suitably different opposition is offered, but is always fundamentally a question of increased activity of some or other of the body cells. The postulate of the homœopathist is that every agent which can damage or destroy a cell can, if administered in a sufficiently small dose, act as a stimulus to the activities of that cell. This is true of the effects of electricity, for instance, on the amœba, and another example can be found in the clinical application of the X-rays. It is well known that excessive exposure to these rays has produced inflamations of the skin, and even cancer, yet they are habitually used to cure or relieve cancer, naturally in modified dosage. Similarly they are used in small

quantity as a stimulant to the growth of hair, though long exposure to them will destroy the hair. These are simple applications of the principle that the agent, which in excess destroys, in reasonable measure stimulates. But there is no reason to doubt that if this be a law of protoplasm, governing its power of reaction, it will apply also to chemical stimuli, in other words, to the effects of drugs and bacterial toxins. We are gradually learning something of the response of the body cells to bacterial attack, we know something of the effect of some drugs, and nothing is more certain than the "selective" nature of different poisons. Their affinity for certain groups of body cells, causes the appearance of appropriate symptoms. Disease, whether bacterial or non-bacterial, consists in a struggle of certain groups of cells against a chemical or other enemy, and the symptoms of the disease are the evidence of the attack and of the defence. The problem for the physician is obviously to aid the defence. Of late the rule has been to support the system as a whole and leave the body, if unaided, at least unhampered, in its specific effort to defeat the enemy; but, clearly, if it were possible to give an extra stimulus to the

particular cell groups that need it, the net result should be a reinforcement of the powers of resistance. If, however, a drug that is a poison in a large dose is a stimulus in a small, if we know that a poison has a definite affinity for the cell groups that need assistance, then the administration of a small dose of that poison should aid those cell groups in their labour of defence. This is the expression of the homœopathic law, and the affinities of drugs are revealed by the homœopathic provings.

"Every circumstance that disturbs the physiological equilibrium of a single cell, or of a large commonwealth of cells, of an organ or of an organism, acts as a stimulus."

"The organs respond to every stimulus that reaches them, which possesses a certain (minimum) amount of intensity, by alterations in their activity."

"Weak stimuli kindle life activity, medium stimuli promote it, strong impede it, and the strongest stop it. But the amount of a stimulus, which in any given case is to be classed as weak, medium, strong or strongest, is entirely a question of individuality." (This is one of the fundamental biological laws formulated by Rudolf Arndt.)

"The practical application of drug

power deals with organs and organisms affected with disease. They are able to react to stimuli that would scarcely be perceived under natural circumstances of complete health."

"The medicine must be rightly chosen. It must be the one to arouse from the diseased organ the most definite reaction possible under all the existing circumstances."

(Drugs act as stimuli to certain groups of cells according to their varying affinities. It is the duty of the physician to use this power.)

"Before a drug can be used at the bedside to the fullest advantage, it is absolutely necessary previously to interpose the experimental use of it on healthy individuals." (Otherwise its sphere of action must be doubtful.)

The quotations might well proceed from the mouth of a lecturer on the principles of Homœopathy. But they do not. They are taken from the introductory lecture to a series on "Wirkung und Anwendung der unorganischen Arzneistoffe," by Professor Dr Hugo Schulz, of the University of Greifswald, that is to say, by an orthodox professor, speaking to an orthodox audi-

ence. Surely, comment is needless. It is bare justice to Dr Schulz to add that he gives full recognition to Hahnemann. He also says that, though he has taught these principles for some years, his teaching has been received in silence by the profession. Thereat he seems surprised. The homœopathist can share the principles, but bitter experience prevents him from sharing the surprise. " Every sedative is a stimulant, and every stimulant a sedative." One more quotation from the (orthodox) President of a learned Society, taken from his introductory address some months ago. The context makes it clear that the President held that the varying action depended mainly on the dose, and homœopathists have no quarrel with his conclusions. Knaves or fools? They are in good company in either case.

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However, in spite of the possibility of thus suggesting that the current of medical thought is flowing nearer to Homœopathy than ever before, it is patent that there is no official recognition of the fact; and if the followers of Hahnemann have no longer virulent opposition to face, there is effective boycotting of them, there is a conspiracy of silence to prevent their principles from

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obtaining publicity. Several reasons exist for this professional unpopularity of Homœopathy, and this argument would be incomplete if they were not considered.

First, there is the feeling fostered, partly by the claims of homœopathists and partly by the ignorance of their opponents, that Homœopathy makes exclusive demands on its votaries, binding them into a narrow sect, and forbidding them to practise any branch of the medical art beyond the prescription of minute doses. The retention of the distinctive name is made a ground of complaint, although there is little doubt that it was originally used as a term of reproach and has become the watchword of those who bear it in a way to which history offers several parallels. To deal with the latter point first, let it be said that however freely homœopathists avail themselves of means to relieve or cure disease other than by the use of drugs, yet in nearly all their handling of the materia medica they are guided by a definite principle, and it is important that this fact should be known. As long as official medicine proclaims Homœopathy an error, it is unfair to patients to give them anything but a free choice; therefore, hospitals and doctors

must be known by the name that expresses the cardinal point in which they differ from the majority. But no homœopathist, from Hahnemann downwards, has used the label except in this sense or has wished to bind any who accepted his law to a rejection of any other method of treatment. The law expresses a belief in a principle of drug selection, and all medicine outside drug selection remains untouched by a belief in it. Justice compels the acknowledgement, however, that it is a common experience among homœopathists, that the more fully equipped a physician is with knowledge of drug action, the less frequently he needs aid from surgery or adjuvant measures. In the early days of Homœopathy, before Pasteur and Lord Lister had made possible the modern triumphs of surgery, the success of Homœopathy was made more marked by the failure of so much of contemporary practice, and it is small wonder if its votaries were filled with an abiding belief in its power. Let it be freely granted that they were slow, and have always been slow, to abandon drug treatment for any surgical or other substitute. In this they are justified. They are not as men without a law. Their faith is grounded on their ex-

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perience, and their caution in accepting enthusiastic statement has been justified before now. But if it can be urged with some truth that they have delayed their assent to much that is claimed for modern medicine, it is not true that they have refused to investigate it, nor that they do not practise what they have found to be valuable. The resources of surgery, of light and heat and electricity are known to, and used by, the homœopathist, who would describe himself to-day as one who desires to know all that there is to be known of ways of relieving the sick, who in this desire is prepared faithfully to investigate any course suggested to that end, who, finally, has found, among other ways, one supremely valuable, the law that guides him in drug treatment; but while he holds it a point of conscience not to deny the faith that is in him, he is not, therefore, prepared to abandon any proved good thing. So let no man be deterred from investigating Homœopathy by any fear that he will be expected, if he find it true, to renounce anything that he has found of value or profess anything beyond that which he has tested for himself.

Another difficulty in the path of Homœo-

pathy consists in the prejudice that so surrounds the name that investigation of the truth requires not only energy but courage. Although the experience of a hundred years has modified the apparent unreasonableness of the doctrine, the hatred roused at its first statement clings about it, and a man may well hesitate, when even to investigate the question is regarded as tampering with an unclean thing. The rule that no medical practitioner should meet a homœopathist in consultation, though less insisted on than formerly, has never been abrogated, and no man who has experienced the loneliness of the heretic can be severe on the man who frankly says that the price, even for enquiry, is too high. Dr Stockmann may be right, but we, most of us, hanker after the shelter of the " compact majority." However convinced a man may be that Homœopathy is founded on an error, it is sheer bigotry to make enquiry difficult or impossible. Science has too often come into conflict with the Church to look well when flourishing the Church s own mediæval weapons. The power of the majority to stifle independent action is considerable, and homœopathists have not unnaturally resented it, sometimes to the extent of con-

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sidering that they must organize themselves entirely outside the ranks of ordinary medical citizenship. But no man breaks the solidarity of his profession with pleasure, or sacrifices the benefits of companionship, except when forced by intolerance. Truly, medicine has never been diffident in dogmatizing, and the falsification by further knowledge of her dogmas is not an unfamiliar experience to her. Now that she claims with more reason the name of "scientific," she may well abandon the unscientific habit of pronouncing judgement without considering the evidence.

A more formidable problem for the investigator is the association of Homœopathy with infinitesimal doses of drugs, nor is there any candour in denying that it is a stumbling-block to the mind trained to ordinary conceptions of matter. That *small* doses can produce effects will now be hardly contested. Not only mercury, but quinine is habitually used in smaller quantities than in bygone years, and many examples of unconscious Homœopathy have owed their success to the small dose associated with them. The medical mind has long rejected the mediæval theories of disease, but in the matter of drug-giving, the influence of past

thought is still evident. How many can resist the belief that if one grain of a drug does good, five grains will do more good? Yet who now believes that the action of a drug-remedy can directly counteract a disease? It can only initiate or stimulate a bodily process, and we no longer set a "cold" medicine against a "hot" disorder. Therefore, common sense would suggest that, as drugs are poisons, more or less virulent, enquiry should be directed to determine how *little* of a remedy will suffice to produce an effect, not how *much* the patient can endure without succumbing. The latter, however, seems still the favourite line of investigation. Nevertheless, there has been a slow modification of general belief. At present to advocate a small dose is not thereby to be stamped as a lunatic. But to make the step from small to infinitesimal is more of an undertaking. Many convinced believers in Hahnemann's law have never taken it, holding that material (if small) doses, serve their turn sufficiently well. But there has always been a body of physicians who maintain that to neglect infinitesimals is to neglect agents of great power. Hardly any man begins by using infinitesimals. The desire for the concrete

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is strong in us all, and it is hard to renounce the feeling that nature must respect our powers of measurement and refuse to respond to agents we cannot define. But, after all, the men who hold by the infinitesimal doses on occasion are the men who have tried them, and only prolonged experience can decide how much truth or error is in their belief. No man, however, need refuse to investigate Homœopathy, because some homœopathists use infinitesimals. Let him begin with doses as material as he pleases, and the sooner results of all kinds are accumulated, the sooner there is a possibility of defining practice. Nevertheless, modern physics certainly make infinitesimals more credible than would have seemed likely a century or even fifty years ago. It may be that light will be thrown on the matter by increased subtlety in measuring the results of bodily activity. For instance, a definite opsonic effect has been claimed to have been demonstrated from the injection (repeated) of a millionth of a milligramme of tuberculin, and the effects of various solutions on the growth and activity of lowly organized forms of life, carry dilution to a point that must seem extreme to many, yet these effects are capable of repe-

tition and extended experiment. It may be possible by some means to show an effect on the human body that can be measured, as the result of a minute dose of a drug. If a minute or infinitesimal dose were shown thus to be active, the *a priori* reasoning against its efficacy would be shaken. Such evidence is desirable, as all cures of disease are open to the explanation that they are due either to natural forces uninfluenced by remedies or to the results of suggestion. Now, to take the latter explanation first, there can be no doubt whatever that medicine in all ages has profited greatly from the power of the mind over the activities of the body, to use the ordinary method of expression. But suggestion is thus a universal factor, and allowance must be made for it in all medical records, non-homœopathic as well as homœopathic. Indeed, since there is generally a relation between the tangibility of the suggestion and its effect, it is obvious that if the scales are weighted in this matter, they are weighted in favour of the medicines of decided " flavour " and against the practically tasteless preparations of the homœopathist. Moreover, infants are not open to suggestion, yet Homœopathy has no more successful field of endeavour than in

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treating infantile diseases. The infant has an enormous advantage as a patient over his elders who are generally steeped in drugs of one kind and another, with or without the connivance of their medical advisers. Further, it is an experience not uncommon to prescribe once or twice for a patient without success, and then by more exact attention cure or markedly relieve him; yet, if suggestion were to act at all, surely its effect would be more marked at first and less potent after one or two failures. Therefore, the impartial mind should surely reject suggestion as the sole explanation of homœopathic success. If so acute a mind as that of James Hinton was content with it, the truth is once again demonstrated how readily the intelligence will find a convincing reason for the thesis it wishes to sustain. But there is the possibility that the disease has got well "of itself," as we say, and uninfluenced by the remedies. Deductions must be made from all records under this heading also. If the deductions are to be held less necessary for orthodox treatment, that must mean that its votaries regard it frequently as a hindrance to natural cure, and they may be left to rejoice in that conviction if they can. As knowledge of the natu-

ral history of disease grows, the claims of remedies will be more and more defined. But it must appear reasonable that if nature has a mechanism for defence against an attack, there should be a means of strengthening that defence or co-operating with it. A physician's success while using both forms of treatment separately and comparing their results is the safest guide, for thereby the factors of skill and knowledge remain constant, and suggestion and power of nature can be cancelled out over a long series of cases. There then remains to decide the result, his actual treatment, and if he is willing to stake the approval of his colleagues and much peace of mind on the superiority of Homœopathy, that is testimony to the strength of his conviction that Homœopathy bears away the palm.

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Finally, there is a serious obstacle to the progress of Homœopathy in the extreme difficulty of practising it well. To fit a remedy to the symptoms of disease demands a knowledge of drug action that only the most patient and constant study can supply. No man can fairly test Homœopathy in less than a year, because he ought to try it throughout a considerable range of cases, and needs some months of study to equip

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himself for the task. Fortunately, however, the acuter diseases are generally easier to deal with; and as their acuteness is evidence of considerable power of bodily reaction, there is hope of aiding that reaction with drugs that are " like " without being absolutely " most like." In an Appendix a few suggestions for the investigator are given; but, as a general rule, it is better to try Homœopathy first in acute diseases. The finer knowledge required to deal with chronic disease may tax the expert, and frequently does, while results are more quickly seen in acuter cases. The renewed confidence which faith in Homœopathy gives, must be experienced to be believed; men who have in despair abandoned drug treatment as useless when not harmful, have found joy and justification for the confidence of their patients in the results that follow the careful application of Hahnemann's law. The task is severe, but the reward is great. The struggle with death must always, in the end, be a losing battle, but in the effort physicians make to win a partial and temporary victory there is support in knowing that no avenue to success, however apparently unpromising, has, through sloth or prejudice, been abandoned without investigation.

V

THE FUTURE AND ITS POSSIBILITIES

THE case of Homœopathy against the majority of the profession is, in brief, that they have condemned it without enquiry and treated its professors with scorn and neglect, while all the time their own practice was unconsciously drawing nearer to that which they were anathematizing.

But there is a counter case that must be dealt with if the *rôle* of special pleader is to be refused. It is not a very serious case, and points in it have been already mentioned: the slowness of homœopathists to admit the benefits of surgery, and of a few adjuvant remedies; and their tendency to claim all good results for their treatment, neglecting the possibilities of natural cure. Traditionally, too, they have been inclined to object to local treatment of disease, such, for example, as external applications to skin diseases. This tradition arose from their very sound habit of regarding the patient and not the disease. Every homœopathist

has always held to a belief in the constitutional effect of every apparently local disorder and has therefore refused, sometimes unnecessarily, to be led astray into thinking a local treatment sufficient. From this point many have gone on to deny the advisability of local treatment of any kind. Now it is at least interesting to note that the hopes founded on the antiseptic treatment of skin diseases have been largely falsified, and that the new vaccine methods are tending to relegate local applications to a place of minor importance; but, nevertheless, let this tradition of the homœopathist stand as a count against him. The future may justify him here also, but no stress need be laid on that while uncertainty prevails. Not that he is inclined, even now, to go all the way that many of the orthodox do in regard to surgery and local treatment. He still generally holds that too much reliance is apt to be placed on those methods to the neglect of the better weapons he possesses, but for the present he will do well to admit that in the past he has erred by overmuch reluctance to see any good thing outside drug treatment in accordance with his law. It is not unnatural. When Richard Wagner had spent a lifetime demonstrating,

in the teeth of the opposition and calumny of nearly every " expert," that most of his ideas were practicable and desirable, small wonder if he came to believe that *all* his ideas *must* be right, and that the number of yards of stuff for Brünnhilde's dress was as much a matter of inspired truth as the scoring of *Tristan*. Also, if he had not maintained it, his disciples would have done, so much easier is it to stereotype a great man's dicta for good or evil than to acquire the quality of his mind. Hahnemann and his followers are in a similar position. The abandonment of the ordinary practice of Hahnemann's day has justified so much of his negative criticism, and instance after instance has confirmed so much of his positive teaching, that it is small wonder if he should come to be considered inspired in every word by some enthusiasts, and placed in a position no mortal man could sustain. But to explain is not to excuse. To-day homœopathists admit that there is much truth in this counter-charge, and they make the only possible reparation in the practical and thankful acceptance of the gains of surgery and bacteriology. But how of their opponents? What course will they take? There are three open to them. Open war-

fare, the conspiracy of silence, and the search for a common basis and meeting ground.

Open warfare is difficult. To be effective it must be whole-hearted; there can be no tampering with the evil thing. The strongest argument against this course is that it has been tried and has failed. Homœopathy is not stamped out, warfare with it means that many promising discoveries must be regarded with suspicion lest they lead to heresy unawares, and though homœopathists are not numerous, they are enough to draw strength from the advertisement of combat. The day is gone by for suppression.

Silence is a better plan. It commits no one to anything and is difficult to attack. Under cover of it enquiry can be pushed forward, and ultimately, the truth that is in Homœopathy can be absorbed without homage to Hahnemann or acknowledgement of his followers.

The strategy is worthy of praise and has another advantage, in that homœopathists, after nearly a century of strife, are only too thankful for a little peace, and, mistaking silence for approval, may promote their own absorption, flattering themselves that they are good medical citizens and proud

of the half-contemptuous semi-recognition they will probably earn from the orthodox whose plans they will be furthering. On the other hand, the net may be too obvious for the bird, and there should be enough vigour in Homœopathy to ensure that if any of its truth is accepted it shall be done with some acknowledgement, however grudging, of those who have supported it against opposition and scorn.

The third course is the generous one. Is there now any majority among the orthodox prepared to maintain that there is no vestige of truth in Homœopathy? But if not, why is the public to be deprived of any benefit there may be in its practice, and why are medical men to be deprived of an additional weapon in the struggle against disease? Grant even that homœopathists exaggerate the value of their law, yet if it has any value there is no more reason for excluding them from any of the privileges of the profession, than for excluding enthusiasts for particular forms of diet or other treatment whose claims for the supreme benefit of their pet practice are not generally conceded. If, then, it be held desirable to heal this breach of a century's standing, obviously the move must come

from those in whose hands remain practically all the prominent posts, all the academic positions and nearly all the public influence. Homœopathists have nothing to offer, save the frankest recognition (if they have ever withheld it) of the benefits conferred on the profession by work in other departments than their own and the acknowledgement that once Homœopathy becomes a recognized province of medicine, the need disappears for the special designation. It would be enough to keep alive the memory of a great man by attaching the name of Hahnemann to hospitals and societies and journals consecrated to special effort along the path he pioneered. Whatever sectarianism is bound up with the name of Homœopathy could be banished. But to achieve this more is needed than the good will of homœopathists. What do they ask of the orthodox, the great body of the profession? Not, be assured, any recognition whatever founded on sentiment, howsoever noble. Justice is a fine name to invoke, and history may well admit that Homœopathy has had less than its share, but no permanent union can come from anything but mutual sense of advantage. Therefore, let the profession give nothing

but free and full investigation. But no commissions of enquiry, no committees of research are sufficient. They can bind no one but their members to conclusions when every man can be himself an investigator. The thing needed is to remove the stigma from the name of homœopathist and encourage every physician to make trial of the law of Hahnemann in his own practice. To this end, let there be three authoritative statements. First, that Hahnemann was no shallow fanatical dreamer, but a physician whose experiments are worthy of repetition and his theories of experiment. Second, that even although homœopathists should be proved by larger experience to be, in the main, mistaken, yet the direct and indirect effects of their teachings have been such as to suggest that there is at least a germ of truth in their opinions, and that it is incumbent on every man to define that germ for the benefit of the profession and of humanity. Thirdly, that the man who devotes time and labour to this branch of materia medica and its practical application deserves well of the State, and that facilities should be given to students and academic reward allotted for proficiency in this field of endeavour. Whether or no

homœopathic materia medica should be a compulsory examination subject can well be left till wider investigation proves its worth; so long as the journals and societies are open to records, the barriers to mutual consultations removed and encouragement given to research, the future can be left to the men who are to come. Then it matters nothing whether the wider enquiry reveals much or little error in Homœopathy; if it be admitted that those who profess it have striven in a worthy cause, they ask no more, and put their faith to the touch cheerfully, since enquiry is the only reward it befits the rest to offer or them to accept.

The Medical Profession has for ages united an astonishing self-confidence to its slowly growing knowledge, leading to one authoritative utterance after another, and no proof of former error has availed much to check the formulation of new dogma. That is the side on which it is most open to attack, the side which makes the candid physician wince, even now, to be caustically described as "half-natural ignorance, half-acquired witchcraft." But it has another side. Alone of all the professions and occupations whereby men live, it has consistently striven to destroy the grounds for its

existence, and, though it lives by disease, to abolish disease. Blind and foolish it may often have been, but if it has blundered, it has blundered on the road of help to humanity and has sought the light of fuller living, in spite of all the errors that have darkened its path. It may well be doubted if a foreseeing race will long permit the dominion of national health to be developed for private profit, but if that privilege be ever withdrawn, it will not be because it has ever been abused or because the profession has ever failed to choose rightly between the public weal and its own advantage when the choice was clear. But if the medical body corporate is to look in the future to become an army of national health, to be the pioneers in that study to produce a finer race which will carry to the forefront of the age the first nation that grasps the fact that men are of more value than money, then it must search out its heart and set its house in order, not only now but for all time. Authority has a value in questions of religion wherein the facts may be for ever beyond our grasp, but in science there can be no authority. Man is man by virtue of his mind, yet the men who take pleasure in independent thought

are a handful in a multitude who long for nothing but a dogmatic statement whereunder they can shelter their intellectual laziness. The medical profession that should be, that shall be, has no place for these. It must be a body to which no theory can seem too fantastic for experiment; no experiment too extraordinary for repetition; no results achieved too wild for utterance. Error there will be, but let there be no concealment, no attempt to decide without investigation or condemn without enquiry. It would aid little if homœopathists were absorbed in the main body only that a solid front should be presented of obstruction against the next gleam of truth that may come in a puzzling form. Rather let their reconciliation, if it may come, be a pledge that the homage of the profession is, henceforward and for ever, due to true science, whose watchword is experiment and whose enemy is authority. So only will it come to be trusted with greater powers, so only can it use them worthily.

When Dante stepped at last through the last barrier of fire and rock into the Earthly Paradise, after sounding the depths of Hell and climbing the steeps of Purgatory, Virgil bade him thenceforward go on a free man,

king and priest over himself. No man ever valued true authority more than Dante, and obedience to rightly constituted rulers, temporal and spiritual, was the keystone of the arch of his world organization; but he knew that for the perfect man there could be no king and no priest, and crown and mitre must rest upon each man's brow. So Medicine must learn her final lesson. Made up of human units, each must be in his way perfect, that she may be perfect, and no perfection is possible till the principle of personal responsibility, fortified by patient personal effort, is substituted for the easier principle of acceptance of authority. Let the truth justify itself to each man according to his capacity unimpeded and unaided by the weight of any dogma. Then there will be no contest except for clearer vision, no recrimination, since no desire except for further light; error will be known for human weakness, to be corrected without anger and made the basis of future truth, and truth will be doubly precious, because accepted by reason and not alone by faith. Then, indeed, shall there be a profession of which its members shall be proud; then, indeed, shall it stand like the greatest of the poets in the Earthly Paradise,

Puro e disposto a salire alle stelle.

APPENDIX

ON COMMENCING THE STUDY OF HOMŒOPATHY

NATURALLY Hahnemann acquired a good deal of experience in dealing with enquirers, and his method was to bring his pupil at once face to face with as many of the difficulties, intellectual and practical, of Homœopathy as possible. He wanted enthusiasts, not Laodiceans, and he knew that the man who had faced the difficulties was secure in his faith, whereas the man who shrank from them would never be a very satisfactory disciple, although he might have gone some way if led up to them by easy stages. This method is a good one for many, and if a man has any keenness in the pursuit of a possible truth in Homœopathy, let him procure, say, Boerickes' *Materia Medica* and a Dictionary of treatment like Dr Clarke's or Dr Lilienthal's, and set to work. In any case, let every investigator, sceptical or otherwise, practise himself and not trouble overmuch with the experience of others. No man can be convinced save by his own results. If, however, he be lukewarm in the matter and wants an easy path, he will probably find Dr Hughes' book on *Pharmacodynamics* a good introduction, and, if interested, can proceed

from that to such works as those of Hahnemann himself, and of Dr Allen, Dr Hering, Dr Kent, Dr Clarke, Dr Jousset and many others.

No man naturally will begin by testing Homœopathy in any case for which he believes himself already to have a satisfactory treatment. He will experiment first on the cases that baffle his ordinary methods; then, even if he fails, he has, at least, the satisfaction of knowing that he has left no path of possible advantage untried, and if he succeeds he gains new enthusiasm for further research. It is probably better to begin by learning a few remedies well. The man who has made a study of aconite, arsenic, bryonia, cinchona, pulsatilla, nux vomica, phosphorus, sulphur, iodine, lime, antimony, podophyllum, gelsemium, is equipped to deal with many acute diseases and some chronic ones, and such a knowledge is the best basis for acquiring a grasp of the materia medica. The natural inclination of the beginner will be to tinctures and "low" dilutions. By all means let it be followed; but if success ensues, let him seek further and test the "high" dilutions. Finally, let the beginner never prescribe without a reason, and keep careful notes of all cases and of symptoms observed and modified by treatment. In this way, if he comes to faith, he can show reason for it and proceed from small knowledge to great.



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